

FAMILY CHILD CARE INITIAL LICENSING CHECKLIST

Use of form: Use of this form is mandatory under HFS 45.08(1)(c) and constitutes one portion of a complete application for a family child care center license.

Instructions: The pre-licensing technical advisor from the Wisconsin Child Care Improvement Project (WCCIP) completes the appropriate column at the end of the pre-licensing process. The applicant for a license completes the appropriate column not more than 14 days prior to submitting an application for a license to the Department of Health and Family Services (DHFS). The DHFS licensing specialist completes the appropriate column at the time of the initial licensing study. **If an applicant is not in compliance with any of the applicable items on this checklist at the time of the initial licensing study by the DHFS licensing specialist, the application for a license may be denied. Following the issuance of a license all items in HFS 45 licensing rules for family child care centers will be reviewed for compliance during the probationary period. Failure to comply may result in license denial.**

Name - Facility		Address - Facility (Street, City, State, Zip Code)							
Name - Facility Contact Person		Telephone Number - Facility Contact Person							

Rule Number	Rule Language	WCCIP TA			Applicant		Licensing Specialist		
		Met	Not Met	NA	Met	NA	Met	Not Met	NA
45.03	OPERATIONAL REQUIREMENTS								
(2)(c)	The center's policies and procedures contain all the required items identified in the licensing rule including SIDS risk reduction procedures. Note: Submit written policies and procedures with application.								
(2)(d)	Written information regarding insurance coverage for the premises, operation or vehicles is included in the written policies and procedures provided to parents.								
(2)(f)	There is a completed staff record form for any person providing care to children.								
(5)(b)	The center has a method for recording daily attendance of the children.								
(5)(c)	There is a medical log book with stitched binding present.								
(6)(b)1. and 2.	The licensee knows how to identify suspected child abuse and neglect and what his / her responsibilities are under the law.								
(6)(b)3.	The licensee knows who to report suspected child abuse and neglect to and has a process to follow when reporting.								
45.04	THE DAY CARE PROVIDER								
(1)(a)	Any person providing care is at least 18 years old.								
(1)(b)	The center will be licensed to care for children under age 1. Each provider has completed either 40 hours of entry level training or 10 hours of training in the care of infants and toddlers. Note: Rules require that other training must be completed within 6 months.								
(1)(b)	The center will only be licensed to care for children over age 1. Each provider must obtain 40 hours of DHFS approved training in early childhood education within 6 months of licensure and an additional 10 hours of training in infant toddler care, if the center will be licensed to care for children under age 2.								

Name - Facility

Telephone Number - Facility Contact Person

Rule Number	Rule Language	WCCIP TA			Applicant		Licensing Specialist		
		Met	Not Met	NA	Met	NA	Met	Not Met	NA
45.04	THE DAY CARE PROVIDER								
(1)(c)	The licensee and any household member aged 10 and above have completed a Background Information Disclosure form. Note: Send the completed forms and any applicable fees to the regional licensing office with the completed application.								
(2)(a)	The provider does not operate another business during the hours that children are in care. Note: Home schooling is considered another occupation. Foster care licensees must consult with a licensing specialist prior to a license being issued.								
(2)(c)	The center will be licensed to provide care for more than 12 hours in any 24 hour period. There is a written schedule of the hours that each qualified provider will be caring for children so that no provider is taking care of children for more than 12 hours.								
(2)(g)	There is a written plan for ensuring that a backup provider is available when the regular provider is gone. Note: The written plan may be part of the center policies. Backup providers must submit a statement indicating that they are available to serve in an emergency.								
45.05	THE HOME								
(1)(a)	The center has at least 35 sq. ft. (280 sq. ft. for 8 children) of useable floor space for each child.								
(1)(c)	There is air conditioning or fans to circulate the air if the inside temperature exceeds 90 degrees F.								
(2)(a)	Any furnaces, fireplaces, electric fans, electrical outlets, etc., in the center are protected by screens or guards.								
(2)(b)	Firearms and ammunition as well as other dangerous items are stored so they are not accessible to children.								
(2)(c)	Materials that are harmful to children are in properly marked containers and stored in an area that is not accessible to children.								
(2)(d)	There is a working telephone and emergency numbers are posted near each phone.								
(2)(e)	There are no hazards on the premises, both indoors and outdoors.								
(2)(f)	There is a motor vehicle immediately available or an emergency vehicle is available within 10 minutes.								
(2)(g)	Differences in elevation are protected by railings that do not allow an object greater than 4 inches in diameter to pass through.								
(3)(a)	There are operating smoke detectors on premises on each level and in all areas used for sleeping, naps or rest periods.								
(3)(b)	There is a fire extinguisher with a minimum rating of 2A 10BC near the kitchen.								

Name - Facility

Telephone Number - Facility Contact Person

SIGNATURES

I have reviewed all the above applicable rules with the applicant. I have indicated those rules that were met at the time of my visit. If a rule was not met at the time of my visit, I have indicated that on the above checklist. A copy of this checklist has been left with the applicant. Date of visit: _____.
(mm/dd/yyyy)

☐ Yes ☐ No Supplemental notes attached._____
SIGNATURE - WCCIP Technical Advisor_____
Date Signed

NOTE: Applicant should review and complete the middle section of this checklist not more than 14 days prior to submitting the application for a license. Checklist may be returned and application process delayed if more than 14 days has elapsed between the date the applicant completed the form and receipt in the licensing office.

I certify that all the above items have been met. I understand that if the DHFS licensing specialist conducts an initial licensing study and finds that any item is not in compliance with the licensing rules at the time of the visit, my application for a license may be denied.

SIGNATURE - Applicant_____
Date Signed

Dates of Initial Licensing Study by DHFS licensing specialist: _____

(mm/dd/yyyy)

(mm/dd/yyyy)

Name - Licensing Specialist (Print)_____
SIGNATURE - Licensing Specialist_____
Date SignedLicense: ☐ **ISSUED** Date issued: _____☐ **DENIED** Date denied: _____

See attached letter of denial.

THE FOLLOWING ITEMS MUST BE SUBMITTED TO DHFS WITH AN APPLICATION FOR A LICENSE.

The Department of Health and Family Services will not issue a license until the background checks are completed, applicable fees have been received and a licensing specialist has verified compliance with all items on the initial licensing study checklist. Allow 60 days for this process to be completed.

- ☐ Completed application form, including diagrams of indoor and outdoor premises.
- ☐ Completed initial licensing checklist.
- ☐ Completed Background Information Disclosure form for licensee and any household residents age 10 and above.
- ☐ Appropriate fees including \$15.12 license fee and \$7.50 for each adult Background Information Disclosure form included with the application.
- ☐ Written policies and procedures.
- ☐ Inspection report for a wood burning stove, if applicable.
- ☐ Building Inspection report if center will be located in a building that is not a one or two family residence.
- ☐ Water test results, if the center uses a private well.
- ☐ Proof of vaccinations, if the center keeps dogs or cats on the premises.
- ☐ Vehicle safety inspection report, if the center will transport children in a center owned vehicle.
- ☐ Copy of the driver license for any person transporting children.
- ☐ If the center has no available on-premises play space, a request for an exemption to use off premises play space and the plan for using that space.
- ☐ If the center has an in ground swimming pool on the premises and the children in care will use that pool, a plan for supervising children during pool use.